



Farmers' Market/ Farm Stand Monitoring Form

Farmer/Market _____ Location _____

Date _____ Reviewer Name _____

PART I: ON-SITE MONITORING

A. Observations

1. Are FMNP signs prominently displayed? _____ Yes _____ No

2. Indicate fruits, vegetables and herbs for sale at the market and prices (if posted):

PRODUCE	Price	PRODUCE	Price	PRODUCE	Price
Apples	_____	Mint*	_____	Zucchini	\$ _____
Artichokes	_____	Mushrooms	_____	(List Others)	_____
Asparagus	_____	Napa Cabbage	_____	_____	_____
Basil*	_____	Onions (green)	_____	_____	_____
Beans (string)	_____	Onions (yellow)	_____	_____	_____
Beets	_____	Oregano*	_____	_____	_____
Blackberries	_____	Parsley*	_____	_____	_____
Blueberries	_____	Parsnips	_____	_____	_____
Bok Choy	_____	Peaches	_____	_____	_____
Boysenberries	_____	Pears	_____	_____	_____
Broccoli	_____	Peas	_____	_____	_____
Brussels Sprouts	_____	Peppers (hot)**	_____	_____	_____
Cabbage	_____	Peppers (sweet)**	_____	_____	_____
Cantaloupe	_____	Plums	_____	_____	_____
Carrots	_____	Potatoes (white)*	_____	_____	_____
Cauliflower	_____	Pumpkins**	_____	_____	_____
Celery	_____	Radishes	_____	_____	_____
Chard	_____	Raspberries	_____	_____	_____
Cherries	_____	Rhubarb	_____	_____	_____
Chives*	_____	Rosemary*	_____	_____	_____
Cilantro*	_____	Rutabagas	_____	_____	_____
Corn	_____	Sage*	_____	_____	_____
Cucumber	_____	Snow Peas	_____	_____	_____
Dill*	_____	Spinach	_____	_____	_____
Garlic*	_____	Squash**	_____	_____	_____
Greens	_____	Strawberries	_____	_____	_____
Kale	_____	Sweet Potatoes	_____	_____	_____
Kohlrabi	_____	Tarragon*	_____	_____	_____
Leeks	_____	Thyme*	_____	_____	_____
Lettuce	_____	Tomatoes	_____	_____	_____
Loganberries	_____	Turnips	_____	_____	_____
Marionberries	_____	Yams	_____	_____	_____

* Not eligible for FVVs

** Edible varieties for human consumption only

WIC approved fruits, vegetables and fresh cut herbs that are locally grown may be purchased with WIC FMNP/SMNP coupons. Eligible foods may not be processed or prepared beyond their natural state except for usual harvesting and cleaning processes. FMNP/SMNP coupons cannot be used to purchase baked goods, meats, flowers, dried fruits and vegetables, ornamental corn, gourds, seafood, eggs, dairy products nuts, or processed foods, such as jams, jellies, honey, maple syrup, candies, juices, or cider.

Fruit and Vegetable Vouchers (FVVs) can be used to purchase any combination of WIC approved fresh, frozen or canned fruits and vegetables. They do not have to be grown in Alaska. This includes whole or cut varieties. They may not have any added sugars, fats or oils. FVVs cannot be used to purchase edible blossoms or flowers, herbs or spices, fruit leathers or fruit roll-ups, white potatoes, baked goods, meats, vegetable-grain or fruit-nut mixtures, dried fruits and vegetables, canned or dried mature legumes, ornamental corn, gourds, seafood, eggs, dairy products, nuts or processed foods, such as jams, jellies, honey, maple syrup, candies, juices, or cider.

1. Describe the condition of the produce at time of visit: _____

2. Is quantity and variety adequate for the average numbers of customers that show up on Market Day?
_____ Yes _____ No
3. How many farmers are selling during the day of the visit? _____
4. What time period does this vendor sell his/her produce? _____
(Information helpful in letting clients know the best time to start using FMNP coupons in their area.)
5. Is vendor aware of the FMNP/FVV check acceptance and redemption process, including the banking services requirements? _____ If not, did you review procedures with the vendor? _____
6. Ask to see any FMNP Coupons/FVVs redeemed that day. Are coupons/FVVs used within allowable time frame?
_____ Yes _____ No _____ No coupons redeemed on day of visit

B. Interview with Farmers; *If possible, interviews with more than one farmer should be completed.*

1. Farm Name _____ **Representative** _____

Ask farmer to briefly go over how he/she handles a WIC FMNP, SFMNP and/or FVV transaction.
Check steps completed during a transaction:

- _____ checks dates on coupon/FVV
- _____ checks participant's ID Booklet (FVV only)
- _____ writes in amount of sale (FVV only)
- _____ has participant sign (FVV only)
- _____ stamps with farmer's vendor number

Are there any problems with WIC, FMNP and/or SFMNP customers or any other aspects of the Program? ____ Yes ____ No

If yes, describe: _____

Comments or suggestions from individual farmers:

2. Farm Name _____ **Representative** _____

Ask farmer to briefly go over how he/she handles a WIC FMNP, SFMNP and/or FVV transaction.
Check steps completed during a transaction:

- _____ checks dates on coupon/FVV
- _____ checks participant's ID Booklet (FVV only)
- _____ writes in amount of sale (FVV only)
- _____ has participant sign (FVV only)
- _____ stamps with farmer's vendor number

Are there any problems with WIC, FMNP and/or SFMNP customers or any other aspects of the Program? ____ Yes ____ No

If yes, describe: _____

Comments or suggestions from individual farmers:

3. Farm Name _____ **Representative** _____

Ask farmer to briefly go over how he/she handles a WIC FMNP, SFMNP and/or FVV transaction.
Check steps completed during a transaction:

- _____ checks dates on coupon/FVV
- _____ checks participant's ID Booklet (FVV only)
- _____ writes in amount of sale (FVV only)
- _____ has participant sign (FVV only)
- _____ stamps with farmer's vendor number

Are there any problems with WIC, FMNP and/or SFMNP customers or any other aspects of the Program? ____ Yes ____ No

If yes, describe: _____

Comments or suggestions from individual farmers:

C. Interview Market Manager/Representative (if available)

Name of Market Manager _____

1. Has the market organization/management structure changed since the agreement was signed?
_____ Yes _____ No
2. When was farmer training/instruction last done? _____ (Date)
3. Does the market provide signs, copies of the Farmers' Market Nutrition Program Rules, instructions for handling the customer coupons/FVVs and other appropriate materials to participating farmers?
_____ Yes _____ No

4. Are there any problems with WIC, FMNP and/or SFMNP customers or other aspects of the Program? ____ Yes ____ No

If yes, describe: _____

5. Would he/she like a training session or additional program materials?

_____ Yes _____ No

6. Is he/she aware of the WIC Program complaint form?

_____ Yes _____ No

7. If problems were identified during the monitoring visit, how does he/she plan to correct these problems? _____

D. Comments

Signatures:

Local WIC Agency Representative

Date

Market Manager

Date

PART II: AFTER THE ON-SITE VISIT

A. Describe general impressions from the actual visit:

B. Describe any problem areas:

C. Does reviewer know, either from participant complaints or from the on-site monitoring visit, if farmers selling at this market or farmstand have:

YES NO

___	___	Provided cash or credit for FMNP/SFMNP coupons and/or FVVs?
___	___	Provided non-food items for FMNP/SFMNP coupons and/or FVVs?
___	___	Provided unauthorized food items?
___	___	Charged WIC customers more than non-WIC customers?
___	___	Charged for items not received?
___	___	Redeemed FMNP/SFMNP coupons and/or FVVs after the period specified?

D. Reviewer's recommendations: